

CLAIMS ONLY							Application Number 10075837		Filing Date			
							Applicant(s)					
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			1		1		51					
2							52					
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45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep			1		1		Total Indep					
Total Depend			49		49		Total Depend					
Total Claims			50		50		Total Claims					